

|                             | Class | Subclass |
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| <b>ISSUE CLASSIFICATION</b> |       |          |

PATENT NUMBER

O.I.P.E.

**PATENT DATE**

SCANNED

## Q.A

|                              |                 |              |                  |                  |                  |         |
|------------------------------|-----------------|--------------|------------------|------------------|------------------|---------|
| APPLICATION NO.<br>09/509779 | CONT/PRIOR<br>D | CLASS<br>435 | SUBCLASS<br>69.1 | ART UNIT<br>1646 | EXAMINER<br>1642 | UNGARIS |
|------------------------------|-----------------|--------------|------------------|------------------|------------------|---------|

## APPLICANTS

YI SUN

**TITLE**

SAG: SENSITIVE TO APOPTOSIS GENE

PTO-2040  
12/99[illegible]

|   |   |              |  |                      |
|---|---|--------------|--|----------------------|
| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>   | <b>DRAWINGS</b>                                 |              | <b>CLAIMS ALLOWED</b>                                |                      |
|   | Sheets Drawg.                                   | Figs. Drawg. | Print Fee  | Print Claim for O.G. |
| <input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.  | _____ (Assistant Examiner) _____ (Date)         |              | <b>NOTICE OF ALLOWANCE MAILED</b><br>_____           |                      |
| <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____  | _____ (Primary Examiner) _____ (Date)           |              | <b>ISSUE FEE</b><br>Amount Due _____ Date Paid _____ |                      |
| <input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.   | _____ (Legal Instruments Examiner) _____ (Date) |              | <b>ISSUE BATCH NUMBER</b><br>_____                   |                      |
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(FACE)